2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001935

FILED Apr 28, 2008 Secretary of State

Entity Name: JULINGTON LANDING OWNERS ASSOCIATION, INC.

	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	NDING BLVD PARK, FL 32	065			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	NDING BLVD PARK, FL 32	065			
FEI Number:	: 59-3640847	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
1022 BLAN ORANGE The above	DONALD W NDING BLVD PARK, FL 32 e named entity e of Florida.		ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUF					
SIGNATOR		nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT (HAGAN, DONA 1022 BLANDIN ORANGE PAR	IG BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DSV (CORREIA, DC 12575 SAN JC JACKSONVILL	SE BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (CORREIA, RIC 12575 SAN JO JACKSONVILL	SE BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	KIRKPATRICK) Delete ., KENNETH B DIRECTO WEST 33RD STREET #200 1474	Title: Name: Address: City-St-Zip:	() Change () Addition	
Address: City-St-Zip:			Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD W HAGAN DPT 04/28/2008